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## **REVOCATION OF POWER OF** ATTORNEY WITH **NEW POWER OF ATTORNEY** AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/659,830		
Filing Date	09/10/2003		
First Named Inventor	Mazen Chmaytelli		
Art Unit	2437		
Examiner Name	Sonny Trinh		
Attorney Docket Number	010157/OUALP706US		

I hereby revoke all previous powers of attorney given in the above-identified application.					
A Power of Attorney is submitted herewith.					
OR  ✓ I hereby appoint the practitioners associated with the Customer Number:			ber:	er: 70797	
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I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature					
Name Thomas Rouse, Vice President, Chief Patent Counsel					
Date July 31, 2007		Telephone	(858) 651-6732	. ?	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of 2forms are submitted.					

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